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SERIAL NUMBER 10/756,817	FILING OR 371(c) DATE 01/13/2004 RULE	CLASS 606	GROUP ART UNIT 3733	ATTORNEY DOCKET NO. 3293.03US10
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APPLICANTS

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** CONTINUING DATA *****

This application is a CON of 09/799,325 03/05/2001 PAT 6,695,848 which is a CIP of 09/261,528
 03/03/1999 PAT 6,197,064
 which is a CON of 08/892,286 07/14/1997 PAT 5,879,354
 which is a DIV of 08/649,465 05/17/1996 PAT 5,755,803
 which is a CIP of 08/603,582 02/20/1996 PAT 5,810,827
 which is a CIP of 08/300,379 09/02/1994 PAT 5,514,139
 and is a CIP of 08/479,363 06/07/1995 PAT 5,643,272
 which is a CIP of 08/342,143 11/18/1994 PAT 5,597,379
 which is a CIP of 08/300,379 09/02/1994 PAT 5,514,139

dc mch

** FOREIGN APPLICATIONS *****

IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY **

** 04/15/2004

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY IN	SHEETS DRAWING 40	TOTAL CLAIMS 34	INDEPENDENT CLAIMS 17
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature <i>Margaret J. [Signature]</i>	Initials <i>[Initials]</i>		

ADDRESS

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TITLE

Methods and apparatus for femoral and tibial resection

FILING FEE RECEIVED 1202	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____
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